

# Update!

A Periodic Report From The

## Washington State Medical Quality Assurance Commission

Volume 1 2003

Spring 2003

### Calendar Of Events

#### Commission Meeting Dates

May 28-30, 2003

Holiday Inn Select, Renton

July 9-11, 2003

Holiday Inn Select, Renton

August 20-22, 2003

Red Lion, Spokane (Workshop)

October 8-10, 2003

Holiday Inn Select, Renton

November 19-21, 2003

Holiday Inn Select, Renton ◀

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### Message From Medical Quality Assurance Commission Chair

Hampton W. Irwin, M.D., Chair

Each and every state medical disciplinary board has two primary functions:

1. To eliminate incompetent physicians from the practice of medicine.
2. To positively influence the conduct of those who can continue in practice.

We, of the Washington Medical Quality Assurance Commission, use our delegated authority to process complaints submitted by persons or entities against Washington physicians and physician assistants. No other agency has that authority.

Our business is *complaint driven* and necessarily, *after the fact*, with distinct limitations set by statute. As it now stands, the Uniform Disciplinary Act gives us the power and obligation to investigate complaints of impropriety limited to individual physicians and physician assistants. By strict definition, we must wait for a complaint or valid suspicion before starting a process of investigation. It shouldn't come as a surprise, therefore, that the public and professional perception of MQAC's function is one of *placing blame* and *setting punishment* for bad medical practice. Often overlooked is the very good work our panels pro-

duce in crafting remedial retraining requirements for deficient providers.

There are those who would have us do more to prevent bad outcomes before they happen. Is there a way that a disciplinary board such as ours could have some influence in preventing the necessity for complaints from the people we are commissioned to protect? The answer is yes, of course! While prevention is not our primary function, we can lend our support by providing useful data to medical educators, practitioners, hospitals, and the legislature. Collection of data is getting more attention from the state medical boards across the U.S., ours included. What is needed is data that gives a clear picture of our work.

Our newest project is **Categorization of Initial Reports**. Starting in 1999, two commissioners and Dr. George Heye, medical consultant began categorizing all entering reports against physicians and physician assistants. Along with tracking numbers of closed reports and cases moving forward, we began assigning all incoming reports into 27 categories. Each report is listed by number, county and up to three descriptive categories ending with a short narrative summary. The pilot project

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## Message From MQAC Chair *(Continued from Page 1)*

analyzed all the reports submitted to the Initial Review Panel for two years, from July 2000 to July 2002 for a total of 1432 reports.

The good news is that out of the uncountable thousands of provider—patient encounters in Washington during two full years, only fourteen hundred generated complaints. Out of the total, 106 reports resulted in actions or are still pending.

The bad news is that numbers of reports are increasing; one of which is the settlement category. Legislation mandates investigation of monetary awards and settlements over \$20,000.

It used to be that a case with a large award was most certainly bad. Such is not the case any more! We are investigating awards One Million and larger that are settled out of fear of more sizeable awards even when there is no demonstrable standard of care deficiency.

A paper describing the findings from the pilot study was submitted to the Federation of State Medical boards to be shared with other states.

As we look further into the potential use of this data, we are adding more categories and demographic markers to allow analysis by provider age, gender, and medical specialty.

### Concerns

At the end of 2002, the number of reports MQAC receives each month was increasing, especially those which

cite termination of care, inadequate provider response, and failure to meet patient expectation. One would be justified in supposing that the worsening health care environment is contributing to a disgruntled public. The negative trends are frightening:

- Premium increases for malpractice insurance are forcing some physicians out of practice in Washington.
- Low Medicare and public assistance reimbursement is causing many (50-60% of practices) to stop taking new patients in those categories.
- Uninsured patients are flooding the emergency departments.

### Celebrations

In the midst of decimated budgets and gloomy predictions, the citizens of Washington can take heart in knowing they have a highly effective medical board working on their behalf. Of our 19 members, four are public members, 13 are physicians. The CV's of each reveal a richness of background and accomplishments. Each serves at some sacrifice in time and money to do a job that is only effective if all of the members have proved capacity for wisdom and quick study of voluminous records and charts.

Under the direction of executive director, Doron Maniece, the commission staff is extraordinarily competent and supportive of the commissioners who rely heavily on them to get the detail work done between meetings.

Investigators and attorneys are very conversant with the special complexities of current medical practice.

### Goals

Taking our lead from the Federation of State Medical Boards, our policy committee is exploring the concept of *System Errors*. As medical practice becomes more complex, many levels of providers function between the physician and patient. When bad outcomes are investigated, we must focus on the physician even when other aspects of performance not accountable to the physician are also at fault. We are searching for pathways of collaboration with our colleagues who regulate hospital practice and lower level practitioners to find ways to improve "systems."

### Public Disclosure

The public relations committee continues to focus on public disclosure issues. Thanks to a concerted effort within DOH many improvements in public access to our data are being introduced.

At the risk on appearing complacent, I am taking the chairman's privilege to claim boasting rights for the quality of the Medical Quality Assurance Commission. Unlike many state boards that have been severely criticized this year, we have maintained an acceptable level of respect from physicians, physician assistants, and the press. It hasn't been easy, but so far we are doing well. ◀

## Public Workshops for Rule-Making Process Announced

The Medical Quality Assurance Commission would like input from the public on requirements for office-based surgery. The Commission will hold four public workshops to provide the opportunity for public input at the dates, times and places listed below.

Red Lion Hotel at the Park .....	August 20, 2003
West 303 North River Drive .....	10:00 a.m.
Spokane WA .....	509-326-8000
Holiday Inn Select .....	October 8, 2003
One Grady Way SE.....	1:30 p.m.
Renton, WA .....	425-254-7206
Health Education Auditorium .....	November 6, 2003
Southwest Washington Medical Center .....	1:30 p.m.
400 NE Mother Joseph .....	360-514-6667
Vancouver WA .....	
Red Lion Inn .....	November 7, 2003
2525 North 20 <sup>th</sup> .....	10:00 a.m.
Pasco WA .....	509-547-0701

The public and licensees are invited to attend any or all of these workshops. If you are interested in participating, but are unable to attend any of these workshops, please submit written comments to the address below:

Beverly A. Teeter, Health Administrator  
PO Box 47866  
Olympia, WA 98504

Email address: Beverly.Teeter@doh.wa.gov  
Fax number: 360-586-4573

If you wish to be kept apprised of the rule making process on this issue, please send, fax, or e-mail us with your name and contact information. If you have any questions, please feel free to contact me at 360-236-4788. ◀

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## Check Your Physician Profile

Visit the Provider Lookup Web site at ([https://fortress.wa.gov/doh/hpqa1/Application/Credential\\_Search/profile.asp](https://fortress.wa.gov/doh/hpqa1/Application/Credential_Search/profile.asp))

### Overview

The Health Professional Quality Assurance Division launched a Web site that provides easy access to information on the 260,000 health care professionals in the state. The Web site provides the health care provider's birth year and license status, including any current restrictions or disciplinary actions. If action has been taken against a health care professional since July 1998, the Web site will allow visitors to review and print copies of legal documents.

Even partial entries will result in a listing of health care professionals to choose from. If a practitioner has more than one credential to practice in Washington, that information will be shown.

### Information available on the site:

- Birth year
- Credential number
- Type of credential(s)

- Whether the health care professional's license is active, deceased, expired, inactive, military, revoked, suspended, unlicensed, or retired.
- The date when they first became credentialed
- Expiration date of credential
- Last renewal date
- Restrictions or disciplinary actions
- Copies of legal documents issued after July 1998

### Information not available on the site:

- If there are restrictions or disciplinary actions prior to 1998
- Complaints that do not result in disciplinary action
- Malpractice settlements and criminal convictions
- Health care provider's residential address
- Specialty information
- Practitioner referrals
- Information protected by law. ◀

# Commission Revised Sexual Misconduct Statement And Policy In October 2002

## Department of Health Health Professions Quality Assurance Division Medical Quality Assurance Commission Policy/Procedure

<b>Title:</b>	Sexual Misconduct Statement and Policy of the Medical Quality Assurance Commission	<b>Number:</b> MD2002-05
<b>Reference:</b>		
<b>Contact:</b>	Beverly A. Teeter, Health Administrator	
<b>Effective Date:</b>	October 11, 2002	
<b>Supersedes:</b>	MD95-04 dated January 25, 1996	
<b>Approved:</b>	Signature on file. Hampton Irwin, MD, Chair, Medical Quality Assurance Commission	

**... I will come for the benefit of the sick, remaining free of all intentional injustice, of all mischief and in particular of sexual relations with both female and male persons . . . .<sup>1</sup>**

### Introduction:

Sexual misconduct between health care providers and patients or key third parties detracts from the goals of the health care provider-patient relationship, exploits the vulnerability of the patient, obscures the health care provider's objective judgment concerning the patient's health care, and is detrimental to the patient's well-being. The Commission wishes to inform health care providers that sexual misconduct, in any form, will not be tolerated.

In enacting this policy governing sexual misconduct by health care providers, the Commission urges all health care providers to be aware that:

A. The health care provider has sole responsibility to maintain the boundaries of the professional relationship by avoiding any type of sexual behavior with patients, or any suggestion of interest in sexualizing the health care provider-patient relationship.

- B. The health care provider has a statutory duty to report any act of sexual misconduct, unprofessional conduct, or any action that indicates that a health care provider is unable to practice with reasonable skill or safety to patients.
- C. There are serious consequences to the health care provider, patients, and the profession when the professional boundary is violated.

### Policy:

#### I. Definitions:

A. **Patient.** The determination of when a person is a patient for purposes of Chapter 18.130.180(24) RCW is made on a case-by-case basis with consideration given to a number of factors, including the nature, extent and context of the professional relationship between the health care provider and the person. The fact that a person is not actively receiving treatment or professional services is

not determinative of the issue. A person is presumed to remain a patient until the health care provider-patient relationship is terminated.

B. **Health Care Provider.** A health care provider, as used in this policy, is a physician licensed under RCW 18.71 or a physician assistant as licensed under RCW 18.71A.

C. **Key Third Parties.** A key third party is a person in a close personal relationship with the patient and includes, but is not limited to spouses, partners, parents, siblings, children, guardians and proxies.

II. **Sexual Misconduct.** Any sexual or romantic behavior between a health care provider and a patient or key third party is forbidden and constitutes sexual misconduct. It includes any and all sexual and romantic behaviors, physical and verbal, whether inside or outside the professional setting, with persons a particular

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profession is intended to serve. Sexual misconduct by a health care provider frequently, though not always, involves use of the power, influence, and/or special knowledge inherent in one's profession in order to obtain sexual gratification or romantic partners.

Sexual misconduct between a health care provider and a patient or key third party includes, but is not limited to, the following behaviors:

1. Any direct, intentional genital stimulation or sexual gratification via oral, manual, genital, instrumental or other means;
2. Any manipulation or penetration of any bodily orifice by any means that is not medically indicated;
3. Any exposure, touch, or manipulation of the breasts, nipples, genital area, buttocks, or anus that is not medically indicated, is not reasonably part of routine care of the patient, or is engaged in for the purpose of sexual gratification;
4. Any medically indicated procedure or aspect of routine care involving the sexual or private parts of the body that is sexualized, prolonged, or altered in order to provide sexual gratification;
5. Any sexualized comments or gestures intended to invite or suggest sexual contact or a romantic relationship;

6. Kissing, fondling, or dating.

Each of the above actions constitute sexual misconduct by the health care provider whether initiated and/or performed by the health care provider or the patient, or by both, and whether or not it occurred inside or outside the professional setting.

**III. Consent.** A patient's or key third party's consent to, initiation of, or participation in sexual behavior or involvement with a health care provider does not change the nature of the conduct. The health care provider has full and sole responsibility to maintain proper boundaries. It shall not be a defense or a mitigating factor that the patient or key third party consented to, proposed, or initiated the sexual contact or the sexual or romantic relationship.

It is improper for a health care provider who engages in sexual misconduct with a patient or key third party to make efforts to avoid full and sole responsibility by pointing to the patient's or key third party's consent or initiation, or by making any other attempt to shift responsibility to the patient, for example, by asserting that the patient or key third party was seductive or manipulative.

**IV. Termination of Health Care Provider-Patient Relationship.**

Once the health care provider-patient relationship has been established, the health care provider has the burden of showing that the relationship no longer exists. The mere passage of time is not determinative of the issue. Because of the varying nature of types of health care provider-patient relationships,

variety of settings, differing practice types, and imbalance in power between health care provider and patient, individual analysis is essential. The Commission will consider a number of factors in determining whether the health care provider-patient relationship has terminated for purposes of determining whether sexual misconduct with a patient has occurred. These factors include, but are not limited to, the following:

1. formal termination procedures;
2. transfer of the patient's care to another health care provider;
3. whether care was terminated for the purpose of entering into a sexual or romantic relationship;
4. the length of time that has passed;
5. the length of time of the professional relationship;
6. the extent to which the patient has confided personal or private information to the health care provider;
7. the nature of the patient's health problem;
8. the degree of emotional dependence and vulnerability; and
9. the extent of the health care provider's general knowledge about the patient.

Some health care provider-patient relationships may never terminate because of the nature and extent of the relationship.

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These relationships may always raise concerns of sexual misconduct whenever there is sexual contact.

**V. Former Patients.** A health care provider who engages in any of the above behaviors with a patient, or key third party, not currently receiving care from the health care provider commits sexual misconduct if the behavior:

1. Occurs as a result of knowledge derived by the health care provider from within the context of the professional relationship;
2. Results from the exploitation of a patient's or key third party's emotions, trust, or influence in the previous health care provider-patient relationship; or
3. Reasonably appears to constitute an abuse of power on the part of the health care provider.

**VI. Diagnosis and Treatment.**

Sexual misconduct excludes behavior that is required for medically diagnostic or treatment purposes and when such behavior is performed in a manner that meets the standard of care appropriate to the diagnostic or treatment situation.

**VII. Discipline.** A health care provider who engages in sexual misconduct commits unprofessional conduct pursuant to Chapter 18.130.180(1) and/or (24) RCW. Upon a finding that a health care provider has committed unprofessional conduct by engaging in sexual misconduct, the Commission will impose one

or more sanctions set forth in Chapter 18.130.160 RCW. In some cases, revocation may be the appropriate sanction. In others, the Commission may restrict and monitor the practice of a health care provider who is actively engaging in a treatment program. When imposing sanctions, the Commission must first consider what sanctions are necessary to protect the public. Only after this is done may the Commission consider and include sanctions designed to rehabilitate the health care provider.

**VIII. Recommendations to Health Care Providers.**

The Commission strongly recommends that a health care provider:

1. Consider having a chaperone present during examination of any sensitive parts of the body.
2. Be aware of any feelings of sexual attraction to a patient or key third party. The health care provider should discuss such feelings with a supervisor or trusted colleague. Under no circumstances should a health care provider act on these feelings or reveal or discuss them with the patient or key third party.
3. Transfer care of a patient to whom the health care provider is sexually attracted to another health care provider. Recognizing that such feelings in themselves are neither wrong nor abnormal, a health care provider should

seek help in understanding and resolving them.

4. Be alert to signs that a patient or key third party may be interested in a sexual relationship. All steps must be taken to ensure that the boundaries of the professional relationship are maintained. This could include transferring the care of the patient.
5. Respect a patient's dignity and privacy at all times.
6. Provide a professional explanation of the need for each of the various components of examinations, procedures, tests, and aspects of care to be given. This can minimize any misperceptions a patient might have regarding the health care provider's intentions and the care being given.
7. Communicate with a patient in a clear, appropriate and professional manner. A health care provider should never engage in communication with a patient or key third party that could be interpreted as flirtatious, or which employ sexual innuendo, off-color jokes, or offensive language.
8. Refrain from discussing the health care provider's personal problems, or any aspect of the health care provider's intimate life with a patient. ◀

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<sup>1</sup> Excerpt from Hippocratic Oath, Fourth Century B.C.

# Commission Adopted Guidelines For The Appropriate Use Of The Internet In Medical Practice In October 2002

## Department of Health Health Professions Quality Assurance Division Medical Quality Assurance Commission Policy/Procedure

<b>Title:</b>	Guidelines for the Appropriate Use of the Internet in Medical Practice	<b>Number:</b> MD2002-04
<b>Reference:</b>	Medical Disciplinary Board - Policy Statement	
<b>Contact:</b>	Beverly A. Teeter, Health Administrator	
<b>Effective Date:</b>	October 11, 2002	
<b>Supersedes:</b>	“Prescribing medication via the internet” MD00-02	
<b>Approved:</b>	Signature on File Hampton Irwin, MD Chair, Medical Quality Assurance Commission	

### Internet In Medical Practice<sup>1</sup>

#### Section One: Introduction

The Internet has had a profound impact on the practice of medicine and offers opportunities for improving the delivery and accessibility of health care. Studies show a growing number of physicians are utilizing the Internet to some degree in their practices and patients want to receive certain medical services online.<sup>2</sup> However, patient safety concerns, especially as related to providing medical services via the Internet, including prescribing and dispensing medications, have created complex regulatory challenges for state medical boards in protecting the public.

The State of Washington Medical Quality Assurance Commission (Commission) recognizes that the Internet offers potential benefits in the provision of medical care. The appropriate application of this technology can enhance medical care by facilitating communication with physicians and other health care providers, refilling prescriptions, obtaining laboratory results, scheduling appointments, monitoring chronic conditions, providing health care information, and

clarifying medical advice. However, it is the expectation of the Commission that e-mail and other electronic communications and interactions between the physician and patient should supplement and enhance, but not replace, crucial interpersonal interactions, which creates the very basis of the physician-patient relationship.

The Commission has developed these guidelines to educate licensees as to the appropriate use of the Internet in medical practice. The Commission is committed to assuring patient access to the convenience and benefits afforded by the Internet while promoting the responsible practice of medicine by physicians.

It is the expectation of the Commission that physicians who provide medical care, electronically or otherwise, maintain a high degree of professionalism and should:

- Place the welfare of patients first
- Maintain acceptable standards of practice
- Adhere to recognized ethical codes governing the medical profession

- Properly supervise physician extenders
- Protect patient confidentiality

#### Section Two: Parity of Professional and Ethical Standards

There should be parity of ethical and professional standards applied to all aspects of a physician's practice. Related to the use of the Internet in a physician's practice, the Commission expects the following ethical standards be observed:

##### A. Candor:

Physicians have an obligation to disclose clearly information (financial, professional, or personal) that could influence patients' understanding or use of the information, products or services offered on any web site offering health care services or information.

##### B. Privacy:

Physicians have an obligation to prevent unauthorized access to or use of patient and personal data and to assure that “de-identified” data cannot be linked back to the user or patient.

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## Commission Adopted Guidelines For The Appropriate Use Of The Internet In Medical Practice In October 2002 *(Continued from Page 7)*

### **C. Integrity:**

Information contained on web sites should be truthful and not misleading or deceptive. It should be accurate and concise, up to date, and easy for patients to understand. Physicians associated with medical web sites should strive to ensure that information provided be supported by current medical peer review literature, emanates from a recognized body of knowledge, and conforms to minimal standards of care. It should clearly indicate whether it is based upon scientific studies, expert consensus, professional experience or personal opinion.

### **D. Informed Consent:**

Delivery of medical services via the Internet requires expanded responsibility on the part of the physician in informing and educating the patient. A patient has the right to know what personal data may be gathered and by whom. The physician must obtain material and informed consent from the patient to collect, share or use personal data. It should be clearly explained to patients when online communication should not take the place of a face-to-face interaction with a health care provider.

### **E. Accountability:**

Physicians have an obligation to provide meaningful opportunities for patients to give feedback about their concerns and to review and respond to those concerns in a timely and appropriate manner.

### **Section Three: An Appropriate Physician-Patient Relationship**

The health and well being of patients depends upon a collaborative effort between physician and patient.<sup>3</sup> The relationship between physician and patient is complex and is based on the mutual understanding between physician and patient of the shared responsibility for the patient's health care. Although the Commission recognizes that it may be difficult in some circumstances, particularly in an online setting, to define individual seeks assistance from a physician with a health-related matter for which the physician may provide assistance. However, the relationship is clearly established when the physician agrees to undertake diagnosis and treatment of the patient and the patient agrees, whether or not there has been a personal encounter between the physician (or other supervised health care practitioner) and patient.

The physician-patient relationship is fundamental to the provision of acceptable medical care. It is the expectation of the Commission that physicians recognize the obligations, responsibilities and patient rights associated with establishing and maintaining an appropriate physician-patient relationship whether or not interpersonal contact between physician and patient has occurred.

### **Section Four: Definitions**

For the purpose of these guidelines, the following definitions apply:

**A. "Medical Practice Site"** means a patient specific Internet site, access to which is limited to licensed physicians, associated medical personnel, and patients. It is an interactive site and thus qualifies as a practice location. It

requires a defined physician-patient relationship.

**B. "General Health Information Site"** means a non-interactive Internet site that is accessible by anyone with access to the Internet and intended to provide general, user non-specific information or advice about maintaining health or the treatment of an acute or chronic illness, health condition, or disease state.

**C. "Personal Health Information"** means any personally-identifiable information, whether oral or recorded in any form or medium, that is created or received by a physician or other health care provider and relates to the past, present, or future physical or mental health or condition of an individual, the provision of health care to an individual, or the past, present, or future payment for the provision of health care to an individual.<sup>4</sup>

**D. "Physician-patient e-mail"** means computer-based communication between physicians (or their medical personnel) and patients within a professional relationship in which the physician has taken on an explicit measure of responsibility for the patient's care.<sup>5</sup> "Passive tracking mechanism" means a persistent electronic file used to track web site navigation, which allows the web site to record, and retain user-specific navigation information whenever the user accesses the web site. Examples include "cookies", "clear gifts", or "web bugs".<sup>6</sup>

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## Commission Adopted Guidelines For The Appropriate Use Of The Internet In Medical Practice In October 2002 *(Continued from Page 8)*

- E. “Web site”** means an electronic source of health information content, commerce, connectivity, and/or service delivery.<sup>7</sup>

### **Section Five—Guidelines for the Appropriate Use of the Internet in Medical Practice**

The Commission has adopted the following guidelines for physicians utilizing the Internet in the delivery of patient care:

#### **A. Evaluation of the Patient**

A documented patient evaluation, including history and physical evaluation adequate to establish diagnoses and identify underlying conditions and/or contraindications to the treatment recommended/provided, must be obtained prior to providing treatment, including issuing prescriptions, electronically or otherwise.

#### **B. Treatment**

Treatment and consultation recommendations made in an online setting, including issuing a prescription via electronic means, will be held to the same standards of appropriate practice as those in traditional (face-to-face) settings. Treatment, including issuing a prescription, based solely on an online questionnaire or consultation does not constitute an acceptable standard of care.

#### **C. Electronic Communications**

Written policies and procedures should be maintained for the use of patient-physician electronic mail. Such policies and procedures should address (1) privacy (2) health care personnel (in addition to the physician addressee) who will process messages (3) hours of operation

(4) types of transactions that will be permitted electronically (5) required patient information to be included in the communication, such as patient name, identification number, and type of transaction (6) archival and retrieval and (7) quality oversight mechanisms. Policies and procedures should be periodically evaluated for currency and be maintained in an accessible and readily available manner for review.

Sufficient security measures must be in place and documented to assure confidentiality and integrity of patient-identifiable information. Transmissions, including patient e-mail, prescriptions, and laboratory results must be secure within existing technology (i.e., password protected, encrypted electronic prescriptions, or other reliable authentication techniques). All patient-physician e-mail, as well as other patient-related electronic communications, should be stored and filed in the patient’s medical record.

Turnaround time should be established for patient-physician e-mail and medical practice sites should clearly indicate alternative form(s) of communication for urgent matters. E-mail systems should be configured to include an automatic reply to acknowledge message delivery and that messages have been read. Patients should be encouraged to confirm that they have received and read messages.

Electronic communications between a physician and a pharmacy of information concerning an original prescription

or a prescription refill for a legend drug or controlled substance must comply with the requirements of RCW 69.41.055, RCW 69.50.312, and WAC 246-870. The Washington State Board of Pharmacy must approve any system of electronic communication between a physician and a pharmacy.

#### **D. Informed Consent**

A written agreement should be employed documenting patient informed consent for the use of patient-physician e-mail. The agreement should be discussed with and signed by the patient and included in the medical record. The agreement should include the following terms:

- Types of transmissions that will be permitted (prescription refills, appointment scheduling, patient education, etc.)
- Under what circumstances alternate forms of communication or office visits should be utilized
- Security measures, such as encrypting data, password protected screen savers and data files, or utilizing other reliable authentication techniques, as well as potential risks to privacy
- Hold harmless clause for information lost due to technical failures
- Requirement for express patient consent to forward patient-identifiable information to a third party

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## Commission Adopted Guidelines For The Appropriate Use Of The Internet In Medical Practice In October 2002 *(Continued from Page 9)*

- Patient's failure to comply with the agreement may result in physician terminating the e-mail relationship.

### **E. Medical Records**

The medical record should include copies of all patient-related electronic communications, including patient-physician e-mail, prescriptions, laboratory and test results, evaluations and consultations, records of past care, and instructions. Informed consent agreements related to the use of e-mail should also be filed in the medical record.

Patient medical records should remain current and accessible for review and be maintained in compliance with applicable state and federal requirements.

### **Compliance with State and Federal Laws and Web Standards**

Physicians should meet or exceed applicable federal and state legal requirements of medical/health information privacy. Physicians must comply with The Uniform Health Care Information Act, RCW 70.02. Physicians are referred to "Standards for Privacy of Individually Identifiable Health Information" issued by the Department of Health and Human Services (HHS).<sup>8</sup> Guidance documents are available on the HHS Office for Civil Rights web site at [www.hhs.gov/ocr/hipaa](http://www.hhs.gov/ocr/hipaa).

Physicians who treat or prescribe through Internet web sites are practicing medicine and must possess appropriate licensure in all jurisdictions where patients reside.<sup>9</sup>

Physicians should comply with nationally recognized health web site standards and codes of ethics, such as those promulgated by the American

Medical Association, Health Ethics Initiative 2000, Health on the Net, and the American Accreditation Health Care Commission (URAC).

### **F. Disclosure**

Physician medical practice sites should clearly disclose:

- Owner of the site
- Specific services provided
- Office address and contact information
- Licensure and qualifications of physician(s) and associated health care providers
- Fees for online consultation and services and how payment is to be made
- Financial interests in any information, products, or services
- Appropriate uses and limitations of the site including providing health advice and emergency health situations
- Uses and response times for e-mails, electronic messages, and other communications transmitted via the site
- To whom patient health information may be disclosed and for what purpose
- Rights of patients with respect to patient health information
- Information collected and any passive tracking mechanisms utilized

### **G. Advertising or Promotion of Goods or Products**

Advertising or promotion of goods or products from which the physician receives direct remuneration, benefits or incentives is prohibited.

### **H. Links**

Physician Web sites may provide links to general health information sites to enhance patient education; however, the physician should not benefit financially from providing such links or from the services or products marketed by such links. When providing links to other sites, physicians should be aware of the implied endorsement of the information, services, or products offered from such sites.

<sup>1</sup> These guidelines are taken from the Federation of State Medical Boards, "Model Guidelines for the Appropriate Use of the Internet in Medical Practice," (April 2002). <http://www.fsmb.org/>.

<sup>2</sup> American Medical Association, Report of the Council on Medical Service, Medical Care Online.

<sup>3</sup> American Medical Association, Council on Ethical and Judicial Affairs, Fundamental Elements of the Patient-Physician Relationship.

<sup>4</sup> Health Web Site Standards, Version 1.0, 2001, American Accreditation Healthcare Commission (also known as URAC), <http://www.urac.org/>.

<sup>5</sup> American Medical Association. Policy H-478.997.

<sup>6</sup> Health Web Site Standards, Version 1.0, 2001, American Accreditation Healthcare Commission (also known as URAC), <http://www.urac.org/>.

<sup>7</sup> Health Web Site Standards, Version 1.0, 2001, American Accreditation Healthcare Commission (also known as URAC), <http://www.urac.org/>.

<sup>8</sup> Federal Register, December 28, 2000.

<sup>9</sup> Federation of State Medical Boards, "A Model Act to Regulate the Practice of Medicine Across State Lines," (April 1996). <http://www.fsmb.org/>.

## Commission Provides Free Educational Opportunities

The Washington State Medical Quality Assurance Commission, in cooperation with the Foundation for Medical Excellence, a non-profit Oregon corporation, continues to offer to a series of on-site, educational programs for physicians and physician assistants in Washington State.

The Foundation offers a selection of its popular educational activities to hospitals and other physician organizations in Washington. Most programs last approximately one hour and can be scheduled at the host group's convenience.

The following list of 27 programs are currently offered at the convenience of the hospital medical staff and are presented without cost:

### On-Site Educational Activities

- Communicating Disappointing Outcomes and Medical Errors
- Heart of Darkness: The impact of perceived mistakes on health professionals
- How Medical Errors are made and How to Avoid Them
- Managing Medical Mistakes
- Meeting the Challenges of Physician Documentation
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## Commission Actions: June 2001–March 2003

Every effort is made to assure the following information is correct. However, before making any specific decisions based on this information, readers are strongly encouraged to check with the Medical Quality Assurance Commission at (360) 236-4791. The summary may not reflect a change occurring near or following the publication date.

### Definition of Actions:

**Summary Suspension/Summary Limitation**—Immediate suspension or limitation of a practitioner's license, pending further disciplinary action. Used in a situation where there is reasonable assumption of immediate danger to the public.

**Findings of Fact, Conclusions of Law and Final Order**—Final order issued by the Commission after a formal hearing where evidence was presented, conclusions were based on law, and sanctions were ordered.

**Stipulated Findings of Fact , Conclusions of Law and Agreed Order**—Settlement between a practitioner and the Commission in which both parties agree to facts, sanctions, and conditions which the practitioner must meet.

Visit the Provider Lookup Web site to view legal documents at :

[https://fortress.wa.gov/doh/hpqa1/Application/Credential\\_Search/profile.asp](https://fortress.wa.gov/doh/hpqa1/Application/Credential_Search/profile.asp)

**Abbott, Dale R., MD**

**License No. MD00025894**

(Burlington, Skagit County, WA)

The Commission terminated the terms and conditions of the July 12, 2001, Agreed Order. The Respondent's license is unrestricted.

October 25, 2002, Order on Request for Release from Commission Order.

**Abbott, Michael L., MD**

**License No. MD00019939**

(Wenatchee, Chelan County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was suspended for an indefinite period of time.

February 27, 2003, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Albert, Leonard H., MD**

**License No. MD00015840**

(Shelton, Mason County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent was reprimanded and his license subject to certain terms and conditions.

February 27, 2003, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Allen, William C., MD**

**License No. MD00008143**

(Bothell, King County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent was reprimanded, required to take a course of billing, and fined.

November 21, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Ang, Eriberto C., MD**

**License No. MD00031648**

(Chino Hills, California)

Following Respondent's waiver of his right to a hearing, the Commission found Respondent had his license disciplined in another state, and suspended his license to practice medicine in Washington indefinitely.

December 12, 2002, Findings of Fact, Conclusions of Law, and Final Order.

**Ashby, William E., MD**

**License No. MD00013587**

(Walla Walla, Walla Walla County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent was reprimanded and his license subject to certain terms and conditions.

February 27, 2003, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Baron, Michael B., MD**

**License No. MD00031513**

(Genesee, ID)

The Commission denied the Respondent's request to terminate the terms and conditions of the January 21, 1999, Agreed Order.

June 10, 2002, Order on Request for Release from Commission Order.

**Bradford, David A., MD**

**License No. MD00026073**

(Omak, Okanogan County, WA)

The Commission granted the Respondent's request and terminated the terms and conditions of the May 27, 1999, Agreed Order. The Respondent's license is now unrestricted.

November 20, 2001, Order on Request for Release from Commission Order.

*(Continued on Page 13)*



## Commission Actions: June 2001–March 2003 *(Continued from Page 12)*

**Brown, Michael Charles, MD**  
**License No. MD00028042**  
(Des Moines, IA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

February 27, 2003, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Brown, Timothy M., MD**  
**License No. MD00019836**  
(Portland, OR)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

May 30, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Bush, Robert D., MD**  
**License No. MD00020774**  
(Grandview, Yakima County, WA)

Following a formal hearing, the Commission found the Respondent failed to comply with a previous Commission order. The Commission imposed a probationary period of five years requiring the Respondent to comply with certain terms and conditions.

January 6, 2003, Findings of Fact, Conclusions of Law and Final Order.

**Chiarottino, Gary D., MD**  
**License No. MD00011022**  
(Bellingham, Whatcom County, WA)

The Commission denied the Respondent's request to reinstate his license.

January 31, 2003, Order on Request for Reinstatement.

**Dhillon, Robin K.J.S., MD**  
**License No. MD00033723**  
(Medina, OH)

Following a hearing, the Commission found that the Respondent's license was limited in another state and that he failed to cooperate with the Commission's investigation. The Commission limited the Respondent's license by prohibiting him from practicing surgery and requiring him to obtain approval prior to practicing medicine in the state of Washington.

March 18, 2002, Findings of Fact, Conclusions of Law, and Final Order (Upon Waiver of Hearing).

**Drapkin, Alan J., MD**  
**License No. MD00033112**  
(Ocean, NJ)

After the Respondent waived his right to a hearing, the Commission found the Respondent did not commit unprofessional conduct, and dismissed the August 28, 2001, Statement of Charges.

May 20, 2002, Findings of Fact, Conclusions of Law, and Final Order.

**Druet, Jack J., MD**  
**License No. MD00035119**  
(Simi Valley, CA)

Following a hearing, the Commission found the Respondent did not commit unprofessional conduct, dismissed the August 13, 2001, Statement of Charges, and exonerated the Respondent.

April 7, 2002, Findings of Fact, Conclusions of Law, and Final Order.

**Duong-Tran, John H., MD**  
**License No. MD00038869**  
(Beaverton, OR)

Following a hearing at which the Respondent failed to appear, the Commission found the Respondent had his Oregon license suspended and suspended his license to practice medicine in the state of Washington.

March 21, 2003, Findings of Fact, Conclusions of Law and Final Order of Default.

**Echeveste, John M., PA-C**  
**License No. PA10003803**  
(Seattle, King County, WA)

The Commission granted the Respondent's request and terminated the terms and conditions of the December 11, 1998, Agreed Order. The Respondent's license is now unrestricted.

November 8, 2001, Order for Release from Agreed Order.

**Ellis, Charles T., MD**  
**License No. MD00039085**  
(Las Cruces, NM)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was revoked. July 11, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Farrington, Julie, MD, Applicant**  
(Port Orchard, Kitsap County, WA)

The Commission and the Respondent entered into an Agreed Order in which the Commission granted the Respondent a license provided the Respondent complies with certain terms and conditions.

August 15, 2001, Stipulated Findings of Fact, Conclusions of Law, and Agreed Order.

**Farrington, Julie, MD**  
**License MD00040359**  
(Gig Harbor, Pierce County, WA)

The Commission terminated the terms and conditions of the August 15, 2001, Agreed Order. The Respondent's license is now unrestricted.

October 25, 2002, Order on Request for Release from Commission Order.

*(Continued on Page 14)*



## Commission Actions: June 2001–March 2003 *(Continued from Page 13)*

**Figueroa, Luciano, PA-C**  
**License No. PA10001809**

(Marysville, Snohomish County, WA)

The Commission granted the Respondent's request and terminated the terms and conditions of a prior order, reinstating the Respondent's license to practice as a physician assistant. The Respondent's license is unrestricted.

June 10, 2002, Order on Reinstatement Request.

**Fisher, John A., MD**  
**License No. MD00031593**  
(Seattle, King County, WA)

The Commission and the Respondent entered into an Agreed Order in which the Respondent was reprimanded and placed on probation for one year, provided he complies with certain terms and conditions.

September 27, 2001, Stipulated Findings of Fact, Conclusions of Law, and Agreed Order.

**Fisher, John A., MD**  
**License No. MD00031593**  
(Seattle, King County, WA)

The Commission terminated the terms and conditions of the September 27, 2001, Agreed Order. The Respondent's license is now unrestricted.

October 25, 2002, Order on Request for Release from Commission Order.

**Galaviz, Manuel R., MD**  
**License No. MD00019433**  
(Vancouver, Clark County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

October 10, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Garcia, Daniel H., MD**  
**License No. MD00019608**

(Concrete, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

January 24, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Garcia, Daniel H., MD**  
**License No. MD00019608**  
(Concrete, Skagit County, WA)

The Commission granted the Respondent's request to eliminate paragraph 4.4 of the January 24, 2002, agreed order to eliminate the requirement for a chaperone for any examination of a disrobed or partially disrobed female patient.

July 25, 2002, Order on Request for Modification of Commission Order & Compliance.

**Garcia, Daniel H., MD**  
**License No. MD00019608**  
(Concrete, Skagit County, WA)

The Commission denied the Respondent's request to modify the January 24, 2002, Agreed Order.

January 30, 2003, Order on Request for Modification of Commission Order.

**Gardner, Marion L., MD**  
**License No. MD00033272**  
(Hillsboro, OR)

The Commission granted the Respondent's request and terminated the terms and conditions of the March 4, 1999, agreed order. The Respondent's license is now unrestricted.

January 3, 2002, Order on Request for Reinstatement.

**Gaudino, John M., PA-C**  
**License No. PA10003343**

(Renton, King County, WA)

The Commission terminated the terms and conditions of the November 5, 1998, Agreed Order. The Respondent's license is now unrestricted.

October 25, 2002, Order on Request for Release from Commission Order.

**Gould, Edward S., MD**  
**License No. MD00025044**  
(Spokane, Spokane County, WA)

Following a failure of the Respondent to respond to a statement of charges, the Commission issued a Findings of Fact, Conclusions of Law and Final Order of Default finding the Respondent provided negligent care to six patients. The Commission suspended the Respondent's license indefinitely. February 14, 2003, Findings of Fact, Conclusions of Law and Final Order of Default.

**Greer, Michael E., MD**  
**License No. MD00019765**  
(Seattle, King County, WA)

The Commission and the Respondent entered into an Agreed Order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

December 13, 2001, Stipulated Findings of Fact, Conclusions of Law, and Agreed Order.

**Haley, Theodore R., MD**  
**License No. MD00004032**  
(Vaughn, Pierce County, WA)

The Commission denied the Respondent's request to modify an August 16, 1991, order.

October 25, 2002, Order on Request for Modification of Commission Order.

*(Continued on Page 15)*

## Commission Actions: June 2001–March 2003 *(Continued from Page 14)*

**Howell, George B., MD**  
**License No. MD00036185**  
(Wichita, KS)

Following a formal hearing, the Commission found that the Respondent had his license disciplined in another state and required the Respondent to, among other things, use a female chaperone when performing breast and pelvic examinations.

June 21, 2002, Findings of Fact, Conclusions of Law, and Final Order.

**Huemer, Richard, MD**  
**License No. MD00026944**  
(Palmdale, CA)

The Commission granted the Respondent's request and terminated the terms and conditions of the September 30, 1994, Agreed Order. The Respondent's license is now unrestricted.

September 6, 2002, Order on Request for Release from Commission Order.

**Iretton, Robert C., MD**  
**License No. MD00018671**  
(Seattle, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

January 24, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Iversen, Mary E., MD**  
**License No. MD00014174**  
(Steilacoom, Pierce County, WA)

The Commission and the Respondent entered into an Agreed Order in which the Respondent's license was placed on probation provided she complies with certain terms and conditions.

November 8, 2001, Stipulated Findings of Fact, Conclusions of Law, and Agreed Order.

**Jeckle, Milan A., MD**  
**License No. MD00009185**  
(Spokane, Spokane County, WA)

The Commission denied the Respondent's request to terminate the December 14, 2000, Agreed Order. December 24, 2001, Order on Request for Release from Commission Order.

**Jeckle, Milan A., MD**  
**License No. MD00009185**  
(Spokane, Spokane County, WA)

The Commission denied the Respondent's request to terminate the terms and conditions of the December 14, 2000, agreed order.

March 27, 2003, Order on Request for Release from Commission Order.

**Kasper, Mark J., MD**  
**License No. MD00035495**  
(Bellevue, King County, WA)

The Commission modified the Agreed Order of September 11, 1997 to eliminate the requirement that the Respondent permit office visits by the Commission.

November 19, 2001, Order on Request for Modification of Commission Order.

**Kasper, Mark J., MD**  
**License No. MD00035495**  
(Bellevue, King County, WA)

The Commission granted the Respondent's request and terminated the terms and conditions of the September 11, 1997, Agreed Order. The Respondent's license is now unrestricted.

December 13, 2002, Order on Request for Release from Commission Order.

**Kester, Eugene F., MD**  
**License No. MD00016979**  
(Spokane, Spokane County, WA)

The Commission granted the Respondent's request to modify the April 19, 1996, Agreed Order to change his compliance appearances from semi-annual appearances to annual appearances.

December 13, 2002, Order on Request for Modification of Commission Order.

**Knapp, David P., MD**  
**License No. MD00015769**  
(San Diego, CA)

The Commission and the Respondent entered into an Agreed Order in which the Respondent's license is restricted.

November 8, 2001, Stipulated Findings of Fact, Conclusions of Law, and Agreed Order.

**Laughlin, John W., PA-C**  
**License No. PA10000728**  
(Chelan, Chelan County, WA)

The Commission terminated the terms and conditions of the December 11, 1997, Agreed Order. The Respondent's license is unrestricted.

May 6, 2002, Order on Reinstatement Request.

**Levy, William H., MD**  
**License No. MD00021325**  
(Seattle, King County, WA)

The Commission granted the Respondent's request and terminated the terms and conditions of the April 20, 2000, Agreed Order. The Respondent's license is now unrestricted.

November 20, 2001, Order for Release from Agreed Order.

*(Continued on Page 16)*

## Commission Actions: June 2001–March 2003 *(Continued from Page 15)*

**Lindholm, George R., MD**  
**License No. MD00016125**

(Spokane, Spokane County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

January 9, 2003, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Littell, Ned G., MD**  
**License No. MD00026284**

(Longview, Cowlitz County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was revoked.

October 10, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Lopez-Samayoa, Omar E., MD**  
**License No. MD00029282**  
(Columbia, KY)

Following a formal hearing, the Commission found that the Respondent had surrendered his license to practice medicine in Kentucky, and was convicted of a felony in Kentucky. The Commission suspended the Respondent's license for an indefinite period of time.

August 26, 2002, Findings of Fact, Conclusions of Law, and Final Order.

**Luu, Huong T., MD**  
**License No. MD00030582**

(Vancouver, Clark County, WA)

The Commission and the Respondent entered into an Agreed Order in which the suspension of the Respondent's license was stayed provided he complies with certain terms and conditions.

September 28, 2001, Stipulated Findings of Fact, Conclusions of Law, and Agreed Order.

**Luu, Huong T., MD**  
**License No. MD00030582**

(Vancouver, Clark County, WA)

The Commission modified the September 28, 2001, Agreed Order to require a practice review prior to the Respondent's next compliance appearance before the Commission.

May 7, 2002, Order on Proposal for Modification of Commission Order.

**Luu, Huong T., MD**  
**License No. MD00030582**

(Vancouver, Clark County, WA)

The Commission denied the Respondent's request to modify a September 28, 2001, Agreed Order.

October 25, 2002, Order on Request for Release From Commission Order.

**Madsen, Paul A., MD**  
**License No. MD00020444**

(Kennewick, Benton County, WA)

The Commission and the Respondent entered into an Agreed Order in which the Respondent's license was placed on probation provided he complies with certain terms and conditions.

November 8, 2001, Stipulated Findings of Fact, Conclusions of Law, and Agreed Order.

**McCabe, Kinne D., MD**  
**License No. MD00017145**

(Seattle, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

January 25, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Merrill, Jeffrey R., MD**  
**License No. MD00032282**

(Edmonds, WA)

Following a formal hearing, the Commission found the Respondent had sexual contact with two patients and committed acts of moral turpitude. The Commission restricted the Respondent's practice to male patients and imposed other terms and conditions.

January 24, 2002, Findings of Fact, Conclusions of Law and Final Order.

**Merrill, Jeffrey R., MD**  
**License No. MD00032282**

(Edmonds, Snohomish County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

July 24, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Mixon, Jerry N., MD**  
**License No. MD00023643**

(Kirkland, King County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

July 11, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Morgan, Robert L., MD**  
**License No. MD00018260**

(Mill Creek, King County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent was reprimanded and his license subject to certain terms and conditions.

October 10, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

*(Continued on Page 17)*

## Commission Actions: June 2001–March 2003 *(Continued from Page 16)*

**Morton, William E., MD**  
**License No. MD00005156**  
(Portland, OR)

The Commission and the Respondent entered into an agreed order in which the Respondent surrendered his license to practice medicine in the state of Washington.

October 10, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Mroch, Henry, MD**  
**License No. MD00033309**  
(Spokane, Spokane County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

October 10, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Muirhead, Richard J., MD**  
**License No. MD00015460**  
(Seattle, King County, WA)

Following a formal hearing, the Commission found the Respondent provided negligent care to patients, violated federal and state drug laws, violated rules established by a health agency, aided and abetted the unlicensed practice of medicine, and failed to adequately supervise auxiliary staff. The Commission suspended the Respondent's license indefinitely, ordered him into the Washington Physicians Health Program, undergo a comprehensive evaluation, and pay a fine.

August 6, 2002, Findings of Fact, Conclusions of Law, and Final Order.

**Myers, Paul B., MD**  
**License No. MD00018262**  
(Quincy, Grant County, WA)

The Commission and the Respondent entered into an Agreed Order in which

the Respondent's license was placed on probation and subject to certain terms and conditions.

July 27, 2001, Stipulated Findings of Fact, Conclusions of Law, and Agreed Order.

**Najera, Alex B., MD**  
**License No. MD00025470**  
(Pasco, WA)

The Commission and the Respondent entered into an Agreed Order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

December 13, 2001, Stipulated Findings of Fact, Conclusions of Law, and Agreed Order.

**Nees, John E., MD**  
**License No. MD00019699**  
(Bellevue, King County, WA)

Following a formal hearing, the Commission found the Respondent had sexual contact with a patient, altered medical records in two cases, misrepresented facts during an investigation, betrayed the physician-patient privilege, and engaged in acts of moral turpitude. The Commission placed the Respondent's license on probation for five years, subject to certain terms and conditions.

January 30, 2002, Findings of Fact, Conclusions of Law and Final Order.

**Pham, Minh V., MD**  
**License No. MD00021481**  
(Seattle, King County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

October 10, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Phillips (Trimble), Catherine M., PA, License No. PA10003181**  
(Glencoe, MN)

Following a formal hearing, the Commission found the Respondent misrepresented material facts in an application to practice in another state, committed acts of moral turpitude and was disciplined in another state. The Commission suspended the Respondent's license for a minimum period of three years.

October 29, 2002, Findings of Fact, Conclusions of Law, and Final Order.

**Phillips (Trimble), Catherine M., PA, License No. PA100003181**  
(Glencoe Minnesota)

The Commission denied the Respondent's request to reconsider the November 5, 2002, Findings of Fact, Conclusions of Law, and Final Order.

December 17, 2002, Order Denying Petition for Reconsideration.

**Pollard, William W., MD**  
**License No. MD00025495**  
(Corvallis, OR)

The Commission and the Respondent entered into an agreed order in which the Respondent's surrendered his license to practice in Washington.

June 27, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Price, Richard F., MD**  
**License No. MD00009049**  
(Packwood, Lewis County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

October 11, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

*(Continued on Page 18)*



## Commission Actions: June 2001–March 2003 *(Continued from Page 17)*

**Rapoport, Dov, MD**  
**License No. MD00037463**  
(New York, New York)

The Commission and the Respondent entered into an agreed order in which the Respondent was reprimanded and fined.

May 30, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Reichler, Robert J., MD**  
**License No. MD00015532**  
(Seattle, WA)

The Commission granted the Respondent's request and terminated the terms and conditions of the July 13, 2000, agreed order. The Respondent's license is now unrestricted.

January 24, 2002, Order on Request for Release from Commission Order.

**Roberton, James W., MD**  
**License No. MD00019524**  
(Federal Way, King County, WA)

The Commission denied the Respondent's request to modify the terms of the November 22, 1996, Agreed Order.

June 10, 2002, Order on Request for Modification of Commission Order.

**Sargur, Mukund, N., MD**  
**License No. MD00019977**  
(Redmond, King County, WA)

Following a hearing, the Commission found the Respondent did not commit unprofessional conduct, dismissed the June 1, 2001, Statement of Charges, and exonerated the Respondent.

May 8, 2002, Findings of Fact, Conclusions of Law and Final Order.

**Schenkar, David L., MD**  
**License No. MD00011364**  
(Olympia, Thurston County, WA)

The Commission terminated the terms and conditions of the January 25, 2001, agreed order. The Respondent's license is unrestricted.

March 18, 2002, Order on Reinstatement Request.

**Schuler, Willard D., MD**  
**License No. MD00017063**  
(Thornton, CO )

The Commission and the Respondent entered into an Agreed Order in which the Respondent surrendered his license to practice medicine in the state of Washington.

December 13, 2001, Stipulated Findings of Fact, Conclusions of Law, and Agreed Order.

**Schiff, Stanley R., MD**  
**License No. MD00025574**  
(Seattle, King County, WA)

The Commission granted the Respondent's request to terminate the terms and conditions of the August 14, 1997, Final Order. The Respondent's license is now unrestricted.

December 13, 2002, Order on Request for Release from Commission Order.

**Sharma, Vimal C., MD**  
**License No. MD00032035**  
(Richland, Benton County, WA)

The Commission granted the Respondent's request and terminated the terms and conditions of the July 10, 1998 order. The Respondent's license is now unrestricted.

August 3, 2001, Order on Reinstatement Request and Compliance.

**Shlafer, Stephen J., MD**  
**License No. MD00028401**  
(Mill Creek, Snohomish County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

February 27, 2003, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Sikora, Michael J., MD**  
**License No. MD00036646**  
(Mead, Spokane County, WA)

The Commission granted the Respondent's request to terminate the terms and conditions of the January 25, 2001, Agreed Order. The Respondent's license is unrestricted.

June 10, 2002, Order on Request for Release from Commission Order.

**Skalsky, Ronald L.**  
**Candidate No. PC00004244**  
(Sioux Falls, SD)

A Health Law Judge, on designation by the Commission, denied the Applicant's application for a license to practice as a physician assistant in the state of Washington.

February 18, 2003, Findings of Fact, Conclusions of Law and Final Order.

**Smith, Eric S., MD**  
**License No. MD00020005**  
(Bellingham, Whatcom County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

November 21, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

*(Continued on Page 19)*



## Commission Actions: June 2001–March 2003 *(Continued from Page 18)*

**Smith, Timothy J., MD**  
**License No. MD00018800**  
(Bothell, WA)

The Commission granted the Respondent's request to terminate the terms and conditions of the May 30, 1997 agreed order.

January 3, 2002, Order on Request for Reinstatement.

**Spann, William J., MD**  
**License No. MD00032058**  
(Kirkland, King County, WA)

The Commission granted the Respondent's request and terminated the terms and conditions of an agreed order of October 6, 2000.

February 27, 2003, Order Terminating Probation and Reinstating Physician Privileges.

**Springel, Ronald D., MD**  
**License No. MD00024392**  
(Spokane, Spokane County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was suspended and subject to certain terms and conditions.

March 7, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Stegall, H. Frederick, MD**  
**License No. MD00011738**  
(Seattle, King County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

January 9, 2003, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Stowens, Daniel W., MD**  
**License No. MD00029365**  
(Pasco, Franklin County, WA)

The Commission terminated the terms and conditions of the June 19, 1997, Agreed Order. The Respondent's license is now unrestricted.

October 25, 2002, Order on Request for Release from Commission Order.

**Swanson, Karl E., MD**  
**License No. MD00029086**  
(Fort Walton Beach, FL)

The Commission and the Respondent entered into an Agreed Order in which the Respondent's license was placed on probation provided he complies with certain terms and conditions.

November 8, 2001, Stipulated Findings of Fact, Conclusions of Law, and Agreed Order.

**Swanson, Karl E., MD**  
**License No. MD00029086**  
(Fort Walton Beach, FL)

The Commission terminated the terms and conditions of the November 8, 2001, Agreed Order.

May 7, 2002, Order on Request for Release from Commission Order.

**Surman, Dusan J., MD**  
**License No. MD00009133**  
(Portland, OR)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

May 31, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Tashakkor, Ezzatollah, MD**  
**License No. MD00022603**  
(Bellevue, King County, WA)

The Commission terminated the November 15, 1996, Agreed Order.

April 23, 2002, Order on Termination of Agreed Order.

**Todd, Mark O., MD**  
**License No. MD00020327**  
(Seattle, King County, WA)

Following a hearing at which Respondent failed to appear, the Commission found Respondent provided negligent care and failed to cooperate with an investigation, and suspended Respondent's license indefinitely.

July 22, 2002, Findings of Fact, Conclusions of Law, and Final Order of Default.

**Tremann, James A., MD**  
**License No. MD00010942**  
(Seattle, King County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

January 10, 2003, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Vanderwielen, Paulus, MD**  
**License No. MD00005232**  
(Bellingham, Whatcom County, WA)

The Commission amended the October 5, 2000, Agreed Order to modify the provision requiring a chart review by another physician.

May 6, 2002, Order on Request for Modification of Commission Order.

*(Continued on Page 20)*

## Commission Actions: June 2001–March 2003 (Continued from Page 19)

**Vidu, Dorian M., MD**  
**License No. MD00022194**  
(Cleveland, OH)

Following a formal hearing, the Commission found the Respondent had his license revoked in Ohio and was convicted of a felony. The Commission granted the Respondent a license to practice medicine in the state of Washington, but imposed restrictions and a probationary period of ten years requiring the Respondent to comply with certain terms and conditions.

January 6, 2003, Findings of Fact, Conclusions of Law and Final Order.

**Wang, Ming R., MD**  
**License No. MD00028873**  
(Omaha, NE)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was suspended indefinitely.

October 10, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order.

**Weddle, Joseph L., MD**  
**License No. MD00011962**  
(Cashmere, Chelan County, WA)  
The Commission and the Respondent entered into an Agreed Order

in which the Respondent's license was placed on probation for an indefinite period of time provided the Respondent complies with certain terms and conditions. September 27, 2001, Stipulated Findings of Fact, Conclusions of Law, and Agreed Order.

**Weddle, Joseph L., MD**  
**License No. MD00011962**  
(Cashmere, Chelan County, WA)

The Commission modified the September 27, 2001, agreed order by changing the requirement that Respondent cannot prescribe controlled substances to patients for longer than 30 days, unless he has referred the patient to another practitioner, who then must see the patient within 90 days.

March 18, 2002, Order on Request for Modification of Order.

**Welch, Roger L., PA-C**  
**License No. PA10001377**  
(Valley, Stevens County, WA)

Following a hearing at which the Respondent did not appear, the Commission found the Respondent was engaged in the current misuse of drugs or alcohol, and failed to comply with a

Commission order. The Commission suspended the Respondent's license indefinitely.

October 17, 2002, Findings of Fact, Conclusions of Law and Final Order of Default.

**Williams, Nelson J., MD**  
**License No. MD00026207**  
(Tacoma, Pierce County, WA)

The Commission denied the Respondent's request to terminate the terms and conditions of the September 24, 1998, agreed order, but modified the order to, among other things, eliminate the triplicate prescription requirement.

October 25, 2002, Order on Request for Release from Commission Order.

**Wisler, Rae, MD**  
**License No. MD00031984**  
(Vancouver, Clark County, WA)

The Commission and the Respondent entered into an agreed order in which the Respondent's license was placed on probation and subject to certain terms and conditions.

May 30, 2002, Stipulated Findings of Fact, Conclusions of Law and Agreed Order. ◀

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## Commission Staff

### Commission Staff ..... Email Address

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## For Your Information

### Speakers Available

Commission members and/or staff members are available for group or organization meetings to discuss the responsibilities and activities of the Commission. For more information contact:

Maryella Jansen  
Deputy Executive Director  
(360) 236-4792

### Address Changes

Remember to keep the Commission informed of any address changes to ensure that your license record is correct and up-to-date. Changes must be submitted in writing to the following address:

Medical Quality Assurance  
Commission  
Attention: Address Change  
PO Box 47866  
Olympia, WA 98504-7866

### Letters to the Editor

Letters to the Editor may be submitted to the attention of Maryella Jansen, Deputy Executive Director, **maryella.jansen@doh.wa.gov**. Letters to the editor may be edited for space. ◀

## Path to Our Web Site:

<https://fortress.wa.gov/doh/hpqa1/hps5/Medical/default.htm>



Practitioners are required by law to keep the Medical Quality Assurance Commission informed of any change in their name or address. This will ensure receipt of the renewal notice and other timely information.

## Name and/or Address Change Form

(Please type or print in ink)

License # \_\_\_\_\_ Social Security # \_\_\_\_\_  
☐ MD    ☐ PA    ☐ PA-C    ☐ PA-SA

### Old Information:

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

### Changes:

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

\*A change in name must be accompanied by a photocopy of the marriage certificate, a divorce decree, or a court-ordered name change (whichever is applicable).

Effective Date \_\_\_\_\_ Signature \_\_\_\_\_

A licensee's address is open to public disclosure under circumstances defined in law, RCW 42.17. The address the Commission has on file for you is used for all mailings, renewal notification and public disclosure.

Mail this completed form to the Commission office:

Medical Quality Assurance Commission  
P.O. Box 47866  
Olympia, WA 98504-7866  
Attention: Address/Name Change ◀

